Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 1 of 52 FILED Fill in this information to identify your case: UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: APR 12 2017 Northern District of Winois Case number (# known): Chapter you are filing under: JEFFREY P. ALLSTEADT, CLERK Chapter 7 Chapter 11 O Chapter 12 Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on your government-issued picture	KATINA	
identification (for example, your driver's license or	First name S	First name
passport).	Middle name MCNABB	Middle name
Bring your picture identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you	кательного поделения на постоя пос КАТІNA	
have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name KNOWLES	Middle name
	Last name	Last name
	First name	Fast name
	Middle name	Middle name
	Last name	Last name
PROTECTION AND AND AND AND AND AND AND AND AND AN	I MANUS KANDANINYO PARANGIRI WAXAANI KANDANINI KANDANINI WAXAANI	
Only the last 4 digits of your Social Security	xxx - xx - <u>9 4 5 8</u>	xxx - xx
number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 2 of 52

Debtor 1 KATINA S	MCNABB	Case number (# known)
rirst Name	Jiddle Name Last Name	
Det er lede i det som er timen, de trette til det til til til til det skillet kelsen kolles i stemen er til st	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Number (EIN) you have used	If a large not used any business names or EINs. YS	I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as name		Business name
	Justices Haire	Monroes Harro
	EIN	EIN
	EIN	EN -
5. Where you live	O CONTRACTOR CO	If Debtor 2 lives at a different address:
	89485, Union Number Street	
		Number Street
	Chicago, Illinois	
	101.76	
	City State ZIP Code	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosin		Сheck one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 3 of 52

Debtor 1

KATINA S MCNABB

Case number (if known)_____

	The chapter of the Bankruptcy Code you	Check of for Bank	ne. (For a brief cruptcy (Form 20	description of each 110)). Also, go to the	n, see <i>Not</i> he top of p	ice Required by 1: page 1 and check t	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	are choosing to file under	☑ Cha	pter 7				
		☐ Cha	pter 11				
		☐ Cha	pter 12				
		☐ Cha	pter 13				
8.	How you will pay the fee	loca your subi	l court for mon self, you may	e details about he pay with cash, on the syment on your be	i <mark>ow you r</mark> ashier's	nay pay. Typica l check, or money	neck with the clerk's office in your fly, if you are paying the fee order. If your attorney is pay with a credit card or check
		☑ I ne d	ed to pay the lication for Indi	fee in installme ividuals to Pay 1	ents. If yo	ou choose this op Fee in Installme	ption, sign and attach the ents (Official Form 103A).
		By la less pay	aw, a judge ma than 150% of the fee in insta	ay, but is not req the official pove allments). If you	uired to, rty line th choose th	waive your fee, a at applies to you his option, you m	tion only if you are filing for Chapter 7 and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.
9.	Have you filed for	☑ No					
	bankruptcy within the last 8 years?	Tyes.	District		When	MM / DD / YYYY	Case number
			District			WHALL DO ! LITT	
							Case number
			District		When	MM / DD / YYYY	Case number
	Are any bankruptcy	☑ No			or Colombia and artist and an annual		
10.	cases pending or being filed by a spouse who is		Debtor				Relationship to you
10.					When		Case number, if known
10.	not filing this case with you, or by a business partner, or by an affiliate?						
10.	you, or by a business		Debtor				Relationship to you

☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

No. Go to line 12.

this bankruptcy petition.

Filed 04/12/17 Entered 04/12/17 10:03:50

Case 17-1155	Document	
Debtor 1 KATINA S Mi		Case number (it known)
Part St. Report About Any	Businesses You Own as a Sole	Proprietor
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	Name and location of busin Name of business, if any Number Street City Check the appropriate box is the state of the properties of the state of	State ZIP Code to describe your business: as defined in 11 U.S.C. § 101(27A)) te (as defined in 11 U.S.C. § 101(51B))
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	can set appropriate deadlines. If you most recent balance sheet, statemer any of these documents do not exist ✓ No. I am not filing under Chapte □ No. I am filing under Chapter 11 the Bankruptcy Code.	the court must know whether you are a small business debtor so that it is indicate that you are a small business debtor, you must attach your not of operations, cash-flow statement, and federal income tax return or if it, follow the procedure in 11 U.S.C. § 1116(1)(B). For 11. It, but I am NOT a small business debtor according to the definition in the land I am a small business debtor according to the definition in the
Report if You Own 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	or Have Any Hazardous Propert ☑ No ☐ Yes. What is the hazard?	ev or Any Property That Needs Immediate Attention
For example, do you own perishable goods, or livestock that must be fed, or a building		

that needs urgent repairs?

City

Number

Street

Where is the property?

ZIP Code

State

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 5 of 52

Debtor 1

KATINA First Name	S MCNABB Middle Name	Last Name	Case number (if known)

Pi	art 6: Answer These Que	stions for Reporting Purpose	5					
16.	What kind of debts do vou have?	16a. Are your debts primarily as "incurred by an individual	y consumer debts? Con primarily for a personal, fam	sumer debts and nily, or househo	e defined in 11 U.S.C. § 101(8) ld purpose."			
	you have.	☐ No. Go to line 16b. ☐ Yes. Go to line 17.						
		16b. Are your debts primarily money for a business or inve	y business debts? Businestment or through the opera	ess debts are out of the busi	debts that you incurred to obtain ness or investment.			
		No. Go to line 16c. Yes. Go to line 17.						
		16c. State the type of debts you o	we that are not consumer d	ebts or busines	s debts.			
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chap	oter 7. Go to line 18.	The second state of the second	જિલ્લા ૧૬૫૬ લાક કરવા કરવા કરવા છે. જે તેમ કરવા કરવા કરવા કરવા કરવા કરવા કરવા કરવા			
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter administrative expenses a	Do you estimate that afte are paid that funds will be a	r any exempt p vailable to distri	roperty is excluded and bute to unsecured creditors?			
	excluded and administrative expenses	☑ No						
togá ellus find	are paid that funds will be available for distribution to unsecured creditors?	U Yes						
18.	How many creditors do	1-49	1,000-5,000		25,001-50,000			
	you estimate that you owe?	☐ 50-99 ☐ 100-199 ☐ 200-999	5,001-10,000 10,001-25,000		☐ 50,001-100,000 ☐ More than 100,000			
19.	How much do you	<u></u> \$0-\$50,000	☐ \$1,000,001-\$10 millio		\$500,000,001-\$1 billion			
	estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 milli \$50,000,001-\$100 mi		\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion			
eastarast	orkistikkus 1918 liiteleest etiisti kolonka takatuunaa etkassi vassaanta pisaan ja 1918 maja etiisti kely-miskyksistikkys 200 200	5500,001-\$1 million	\$100,000,001-\$500 m		☐ More than \$50 billion			
	How much do you	\$0-\$50,000	📮 \$1,000,001-\$10 millio		\$500,000,001-\$1 billion			
	estimate your liabilities to be?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 milli \$50,000,001-\$100 mil		□ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion			
		\$500,001-\$1 million	\$100,000,001-\$500 m		More than \$50 billion			
Pa	rt 77. Sign Below							
Fo	r you	I have examined this petition, and correct.	I declare under penalty of pe	erjury that the ir	nformation provided is true and			
		If I have chosen to file under Chapt of title 11, United States Code. I ununder Chapter 7.	ter 7, I am aware that I may nderstand the relief available	proceed, if eligi under each ch	ible, under Chapter 7, 11,12, or 13 apter, and I choose to proceed			
		If no attorney represents me and I this document, I have obtained and	did not pay or agree to pay a read the notice required by	someone who is	s not an attorney to help me fill out 42(b).			
		I request relief in accordance with t	•	-				
		I understand making a false statem with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	n fines up to \$250,000, or in	obtaining mone oprisonment for	ey or property by fraud in connection up to 20 years, or both.			
		* Katua S. Was	<u> </u>	: 4-12	217 en			
		Signature of Debtor 1	7:17	Signature of D	ebtor 2			
		Executed on O 4 - 12 - A	101/ Y	Executed on	MM / DD /YYYY			

Debtor 1

KATINA S MCNABB
First Name Middle Name Last Name

Case number	(if known)
-------------	------------

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1
-------	--------	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	l am	not	required	to	receive	2	briefing	about
	cred	it co	unseling	þ	ecause ()f:	:	

U Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefin person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	2	briefing	about
cred	it co	umselino	ı ba	ecause (÷		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 7 of 52

Debtor 1

KATINA S MCNABB
First Name Middle Name Last Name Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fixed and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a s consequences?	serious action with long-term financial and legal
□ No	
☑ Yes	
Are you aware that bankruptcy fraud is a seri inaccurate or incomplete, you could be fined	ious crime and that if your bankruptcy forms are or imprisoned?
□ No	
☑ Yes	
Did you pay or agree to pay someone who is ☐ No☐ Yes. Name of Person	not an attorney to help you fill out your bankruptcy forms?
Attach Bankruptcy Petition Preparer's N	Notice, Declaration, and Signature (Official Form 119).
By signing here, I acknowledge that I understate have read and understood this notice, and I a attorney may cause me to lose my rights or process.	and the risks involved in filing without an attorney. I m aware that filing a bankruptcy case without an roperty if I do not properly handle the case.
* Katina S. Mcholl	×
Signature of Debtor 1	Signature of Debtor 2
Date 04-11-2017 MM/DD /YYYY	Date MM / DD / YYYY
Contact phone (773) 439-9589	Contact phone
Cell phone	Cell phone
Email address k_mcnabb@att.net	Email address

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 8 of 52

Debtor 1	KATINA S MCNABB				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Case number	Bankruptcy Court for	the: Northern District of I	llinois		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.		
Partific Summarize Your Assets		
	Your assets Value of what you own	
Schedule A/B: Property (Official Form 106A/B)	40.04.77.00	
1a. Copy line 55, Total real estate, from Schedule A/B	\$12,017.00	
1b. Copy line 62, Total personal property, from Schedule A/B	\$\$	
1c. Copy line 63, Total of all property on Schedule A/B	\$ 16,252.00	
Part 2: Summarize Your Liabilities	Your liabilities	
	Amount you owe	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$ <u>132,108.00</u>	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ _{\$} 142,932.00	
Your total liabili	tities \$ 282,640.00	
Part 3: Summarize Your Income and Expenses		
	£ 1,820.00	
4. Schedule I: Your Income (Official Form 106I)	\$ 1,020.00	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 9 of 52

Dei	btor 1	KATINA S First Name	MCNABB Middle Name	Last Name	Case number (if known)	
P.	art 4:	Answer The	se Questions fo	r Administrative	and Statistical Records	
6.		You have nothi	• •	apters 7, 11, or 13?	eck this box and submit this form to the court with y	your other schedules.
7.	2 You		- imarily consumer		bts are those "incurred by an individual primarily fo ines 8-9g for statistical purposes. 28 U.S.C. § 159.	
	☐ You	r debts are no		ner debts. You have	nothing to report on this part of the form. Check the	
8.				onthly Income: Copy se 11; OR , Form 1220	your total current monthly income from Official C-1 Line 14.	\$1,820.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$8
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$7,600.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$67,418.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 75,018.00

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 10 of 52

Fill in this information to identify your case and th	is filing:		
Debtor 1 KATINA S MCNABB			
First Name Middle Name Debtor 2	Lard Marris		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of	f Illinois 🔀		
Case number		٣	Check if this is an
		<u>. </u>	amended filing
Official Form 106A/B			
Schedule A/B: Propert	ty		12/15
category where you think it fits best. Be as comp responsible for supplying correct information. If r write your name and case number (if known). Ans	ns. List an asset only once. If an asset fits in more lete and accurate as possible. If two married people nore space is needed, attach a separate sheet to the wer every question. In Land, or Other Real Estate You Own or Harman and the second sec	e are filing together, bo is form. On the top of a	th are equally
POST Describe Each Residence, building	is Laid, or Other Real Litate 102 Own or 122	re dii interest iii	<u> </u>
	est in any residence, building, land, or similar prop	erty?	
W No. Go to Part 2. ✓ Yes. Where is the property?			
Tes. Where is the property:	What is the property? Check all that apply.	Do not deduct secured cla	ains or exemptions. Put
1. 8948 S UNION AVE	Single-family home	the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		
	Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	- 🔲 Land	\$126,310.00	\$12,017.00
CHICAGO IL 60620	Investment property	Describe the nature o	nf vois osmorchio
City State ZiP Code	— ☐ Timeshare ☐ Other	interest (such as fee	simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.
соок	Debtor 1 only		
County	Debtor 2 only	—	
,	Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
	At least one of the debtors and another		
	Other information you wish to add about this it property identification number: 25-04-117-0		
If you own or have more than one, list here:			
	What is the property? Check all that apply.	Do not deduct secured cla	
12.	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clain	
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	☐ Manufactured or mobile home	entire property?	portion you own?
	Land	\$	\$
	Investment property	Describe the nature of	of your ownership
City State ZIP Code	Timeshare Other	interest (such as fee:	simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life	e estatej, ii known.
	Debtor 1 only		
County	Debtor 2 only		
County	Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this ite property identification number:		
and the second s	and the second of the second o		

Document Page 11 of 52 KATINA S MCNABB Debtor 1 Case number (if known Middle Name Last Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condonisiam or cooperative entire property? portion you own? Manufactured or mobile home ☐ Land Investment property Describe the nature of your ownership 71 Code Timeshare Oxy State interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 12.017.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No M Yes **NISSAN** Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: **MAXIMA** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year Current value of the Current value of the Debtor 1 and Debtor 2 only 70000 entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 17,815.00 235.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only harreteri-Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions)

Case 17-11551

Doc 1

Filed 04/12/17

Entered 04/12/17 10:03:50

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Page 12 of 52 Document KATINA S MCNABB Debtor 1 Case number (if known) First Name Middle Name Who has an interest in the property? Check one. Make: 3.3 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see (anoitxutars) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessets, snowmobiles, motorcycle accessories ☐ No Q Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2 Make: Do not deduct secured claims or exemptions, Put the amount of any secured claims on Schedule D: Debtor 1 only Mirechelle Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own?

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

instructions)

235.00

Other information:

At least one of the debtors and another

Check if this is community property (see

Document

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Page 13 of 52

Debtor 1

KATINA S MCNABB

Last Name

Case number (if known)

D,	o vou own or have any lo	gal or equitable interest in any of the following items?		value of the
				rou own? fact secured claim ons.
6.	Household goods and fi	umishings		
	Examples: Major appliance	es, furniture, linens, china, kitchenware		
	U No .		an and have	
	Yes. Describe	USED FURNITURE	\$	2,000.00
7.	Electronics			
	collections; ele	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ectronic devices including cell phones, cameras, media players, games		
	<u>Q</u> No			
	Ma Yes. Describe	TELEVISION, COMPUTER, CELL PHONE	\$	1,000.00
8.	Collectibles of value		/ *** / *** /	
		igurines; paintings, prints, or other artwork; books, pictures, or other art objects; baseball card collections; other collections, memorabilia, collectibles		
	☐ Yes. Describe		\$	
_	<u>.</u>			
3.	and kayaks; ca	d hobbies raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes upentry tools; musical instruments		
	No			
	Yes. Describe		\$	
ın	Firearms		into all addish	
ıu.		hotguns, ammunition, and related equipment		
	Yes. Describe		\$	
1.	Clothes			
	Examples: Everyday cloth-	es, furs, leather coats, designer wear, shoes, accessories		
	□ No			
	Yes. Describe	JSED CLOTHES	\$	1,000.00
3	Jewelry			
	•	ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	gold, silver			
	No -			
	Yes. Describe		\$	
3.	Non-farm animals	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	***************************************	
	Examples: Dogs, cats, bird	is, horses		
	No			
	U Yes. Describe		\$	
4.	Any other personal and h	ousehold items you did not already list, including any health aids you did not list		
	Ø №			
	Yes. Give specific			
	information		<u> </u>	
5	Add the dollar value of al	l of your entries from Part 3, including any entries for pages you have attached		4,000.00
	5 D 4 D 388 75 - 45 - 4		>	↔, ℧℧℧.℧℧

Document

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Page 14 of 52

Debtor 1

KATINA S MCNABB

Last Name

			200	
₩;	П	. AL	ж	×
		2.8		D.
	100			

Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?	p D	Current value of the ortion you own? to not deduct secured claims rexemptions.
16. Cash <i>Examples:</i> Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file y	your petition	
☑ No				
		Ca	sh:	\$
		unts; certificates of deposit; shares in credit unions, bruttiple accounts with the same institution, list each.	rokerage houses,	
U No ☑ Yes		Institution name:		
	17.1. Checking account:	BANK OF AMERICA		\$ 500.00
	17.2. Checking account:		****	\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5, Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			
	or publicly traded stocks investment accounts with broken	erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
				5
				
9. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including a	n interest in	
☑ No	Name of entity:		of ownership:	
Yes. Give specific information about		09		
them	·	09		5
		09	<u>6</u> % \$	

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Page 15 of 52
Case number (# known) Document

KATINA S MCNABB Debtor 1

First Name Middle Name

Last Name

04/12/11	10.03.30	Desc	iviaiii
of 52			

20. Government and corp	orate bonds and other	negotiable and non-negotiable instruments	
		s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
☑ No		at taken to control by againing at takening train.	
Yes. Give specific	Issuer name:		
information about them			\$
E EAS E Sunumanner en Louis autour			\$
			\$
21. Retirement or pension		(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Z No	VI, ENISK, ROUGEI, 40 I	(k), 400(b), whit savings accounts, or other person or profesioning pairs	
Yes. List each			
account separately.	Type of account: 1	institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
	Keogh		\$
	Additional account:		\$
	Additional account:		\$
		de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	
Q Yes	Instit	ution name or individual:	
	Electric:		\$
	Gas:		\$
	Heating oil:		\$
	Security deposit on rental	i erit	\$
	Prepaid rent:		\$
	Telephone:		\$
	Water.		\$
			\$
	Other:		\$
23. Annuities (A contract fo	a periodic payment of	money to you, either for life or for a number of years)	
Z No	_ paymont of	y and y and an	
☐ Yes	Issuer name and descri	ption:	
			\$
			\$
			\$

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 16 of 52 TINIA S MONIARR

Debtor 1

AIINA :	S MCNABB	
irst Name	Middle Name	Lest Name

Case number (if known)_

26 U.S.C. §§ 530(b)(1), 529A(b),	and 529(b)(1).		
☑ No			
Q Yes	stitution name and description. Separately file the records of any inten	ests.11 U.S.C. § 521(c) :
мания			3
weather			\$
			\$
Trusts, equitable or future interest exercisable for your benefit	ests in property (other than anything listed in line 1), and rights o	r powers	
☑ No			
Yes. Give specific		and the second s	
information about them			\$
		thing over the section of the graph against according to the section and the s	
	s, trade secrets, and other intellectual property s, websites, proceeds from royalties and licensing agreements		
Z No	" more more than the man and m		
Yes. Give specific			
information about them			\$
Solve a manual		and an area and an area of the second of the	ul.
Licenses, franchises, and other			
	sive licenses, cooperative association holdings, liquor licenses, profes	sional licenses	
☑ No			7
Yes. Give specific information about them			\$
BEARINGAN COOR BASEL			<u> </u>
ney or property owed to you?			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
Tax refunds owed to you			
M No			
Yes. Give specific information			
about them, including wh			
you already filed the return and the tax years.		State:	5
GRAI GRC MAX YOURS.		Local:	§
	The No. of Control of the State		
Examples: Past due or lump sum	alimony, spousal support, child support, maintenance, divorce settlem	ent, property settlemer	nt
Examples: Past due or lump sum		ent, property settleme	nt
Examples: Past due or lump sum			
Examples: Past due or lump sum		Alimony:	\$
Examples: Past due or lump sum		Alimony: Maintenance:	\$ \$
Family support Examples: Past due or lump sum : No Yes. Give specific information.		Alimony: Maintenance: Support	\$ \$ \$
Examples: Past due or lump sum		Alimony: Maintenance: Support Divorce settlement:	\$\$ \$\$ \$
Examples: Past due or lump sum		Alimony: Maintenance: Support	\$ \$ \$
Examples: Past due or lump sum: No Yes. Give specific information. Other amounts someone owes	FOU	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$ \$
Examples: Past due or lump sum : No Yes. Give specific information. Other amounts someone owes y Examples: Unpaid wages, disabilit	FOU y insurance payments, disability benefits, sick pay, vacation pay, wor	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ \$
Examples: Past due or lump sum: No Yes. Give specific information. Other amounts someone owes y Examples: Unpaid wages, disabilit Social Security benefit	FOU	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$\$ \$\$ \$\$
Examples: Past due or lump sum : No Yes. Give specific information. Other amounts someone owes y Examples: Unpaid wages, disabilit	y insurance payments, disability benefits, sick pay, vacation pay, wor s; unpaid foans you made to someone else	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$\$ \$\$ \$

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Document Page 17 of 52 KATINA S MCNABB Debtor 1 Case number (# known) First Name Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance M No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. M No Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Mo No Yes. Describe each claim.... 35. Any financial assets you did not already list 2 No Yes. Give specific information. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 500.00 for Part 4. Write that number here Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? Mo. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ₩ No Yes. Describe.... 39. Office equipment, furnishings, and supplies

Yes. Describe...

M No

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 18 of 52

Debtor 1 KATINA S MCNABB

A HINA S	NICINADD	
PC . 5.1		
First Name	Middle Mame	l act Name

Case number (if known)

☑ No	uipment, supplies you use in business, and tools of your trade		
****			Toka rang.
Yes. Describe			\$
Say.			
f1. Inventory			
444 140			1 A Parking
☐ Yes. Describe			
12. Interests in partnership	or joint ventures		
No No			
Q Yes. Describe	Name of entity: % of own	ership:	
			\$
		%	\$
		%	\$
12 Cuctomer lists mailine	lists, or other compilations		
S. Customer rists, maining	iists, or other compilations		
	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
□ No			
Yes, Descr	be		
100, 2000			\$
4. Any business-related p	roperty you did not already list		
₩ No			
Yes. Give specific			\$
information		-	
			\$
			\$
			\$
			\$
			_
			\$
5. Add the dollar value of	all of your entries from Part 5, including any entries for pages you have attached		\$ 0.00
for Part 5. Write that no	umber here	-	*
	•		
Part 6: Describe An	y Farm- and Commercial Fishing-Related Property You Own or Have an Int	erest li	t.
If you own or	have an interest in farmland, list it in Part 1.		
16. Do you own or have an	y legal or equitable interest in any farm- or commercial fishing-related property?		
No. Go to Part 7.			
Yes. Go to line 47.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
7. Farm animals			-
Examples: Livestock, po	ultry, farm-raised fish		
Ma No			
☐ Yes			
Long or		a management of a state of	<u> </u>

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50

Document Page 19 of 52 KATINA S MCNABB Case number (# known) Debtor 1 First Name Last Name 48. Crops-either growing or harvested 2 No Yes. Give specific information... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Mo No O Yes 50. Farm and fishing supplies, chemicals, and feed M No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here ... Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Mo No Yes. Give specific information..... 0.0054. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 12,017.00 55. Part 1: Total real estate, line 2 ... 235.00 56. Part 2: Total vehicles, line 5 4,000.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 4,235.00 Copy personal property total *> 4,235.00 62 Total personal property. Add lines 56 through 61.

16,252.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 20 of 52

Fi	ll in this inform	ation to identify you	rcase:						
Di	ebtor 1 KAT	INA S MCNABB	Aktille Name	Last Name					
	ebilor 2 pouse, if filling) First N		distille Harry	Last Marie		NAME OF THE PROPERTY OF THE PR			
		uptcy Court for the: North		Cook House					
	ese skarábes known)			 		O TOTAL DESIGNATION OF THE PROPERTY OF THE PRO			Check if this is an amended filing
Of	ficial Forr	n 106C							
S	chedul	e C: The	Property	You	Claim	as	Exemp	t	04/16
Usir spa	ng the property y se is needed, fill	ou listed on Schedule	If two married people A/B: Property (Official page as many copies	Form 106.	A/B) as your so	ource, lis	t the property that	you claim as e	xempt. If more
spe of a retir limi	cific dollar amo ny applicable s rement funds— ts the exemptio	unt as exempt. Alter tatutory limit. Some may be unlimited in	exempt, you must sp natively, you may cla exemptions—such a dollar amount. Howe ar amount and the va tory amount.	nim the ful s those fo ver, if you	l fair market v r health aids, i claim an exer	alue of t rights to nption o	the property being receive certain of 100% of fair ma	g exempted up benefits, and t arket value und	p to the amount ax-exempt der a law that
Pa	Mide Identi	fy the Property Yo	u Claim as Exemp	t		····			
	You are cla	iming state and federa	aiming? Check one on all nonbankruptcy exemons. 11 U.S.C. § 522(lube A/B that you clair	nptions. 11 b)(2)	U.S.C. § 522(I	o)(3)	ŕ		
	Brief descripti	on of the property and	l line on Current val	ue of the			ption you claim	Specific laws	s that allow exemption
		uma ases thas property	Copy the va Schedule A	lue from	Check only o	ne box fo	r each exemption.		
	Brief description:	Used Furniturer	\$2,000.0	0	□s			735 ILCS 5	5/12-1001(b)
	Line from Schedule A/B:	6					ket value, up to atutory limit		
	Brief description:	TV, Computer, F	<u>Phone</u> \$1,000.0	0	3 \$	Fair ward	ket value, up to	735 ILCS 5	i/12-1001(a)
	Line from Schedule A/B:	7					atutory limit		
	Brief description:	Used Clothing	<u>\$1,000.0</u>	0	Q \$			735 ILCS 5	5/12-1001(b)
	Line from Schedule A/B:	11					cet value, up to atutory limit	***************************************	
3.			mption of more than t devery 3 years after th		s filed on or aft	er the da	ate of adjustment.)	
	✓ No✓ Yes. Did you✓ No✓ Yes	acquire the property	covered by the exemp	otion within	1,215 days be	fore you	filed this case?		

Document

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Page 21 of 52

Debtor 1

KATINA S MCNABB

Middle Name

Last Name

Case number (if known)_

Part 2:

Additional Page

on Schedule A	ion of the property and line VB that lists this property	ent value of the on you own	Amount of the exemption you claim	Specific laws that allow exemption
		the value from dule A/B	Check only one box for each exemption	
Brief description:	Family House	\$ 12,017.00	_ s	735 ILCS 5/12-901
Line from Schedule A/B:	1		100% of fair market value, up to any applicable statutory limit	
Brief description:	NISSAN 2013	\$ 235.00		735 ILCS 5/12-1001(b)
Line from Schedule A/B:	3		100% of fair market value, up to any applicable statutory limit	****
Brief description:		\$ · · · · · · · · · · · · · · · · · · ·	 \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$ 	<u> </u>	
Line from Schedule A/B:	•		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$ 	U \$	
Line from Schedule A/B:	**************************************		☐ 100% of fair market value, up to any applicable statutory limit	MAY STATE OF THE S
Brief description:	No. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	\$ 43844 · · · · · · · · · · · · · · · · · ·		
Line from Schedule A/B:	and the control of th		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$ 		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u> </u>	\$ 	Q \$	
Line from Schedule A/B:	n miy mig vig Vandour manne		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$ 	Q \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$ 	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$ 	- s	
Line from Schedule A/B: -			100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	- s	
Line from Schedule A/B:	***************************************		100% of fair market value, up to any applicable statutory limit	

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 22 of 52

Fill in this information to identify your case Debtor 1	karne Last Name			c if this is an ded filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Prop	erty	12/15
information. If more space is needed, copy additional pages, write your name and cas 1. Do any creditors have claims secured b	· · · ·	and attach it to this	form. On the top of	ect of any
Part 1: List All Secured Claims				
for each claim. If more than one creditor ha	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collatera that supports this claim	
2.1 CREDIT ACCEPTANCE CORP	Describe the property that secures the claim:	\$ 17,815.00	s 18,050.00	0.00
Creditor's Name PO BOX 5070	2013 NISSAN	production of the state of the		
SOUTHFIELD MI 48086 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)	}		
Deckor 1 and Deckor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt Date debt was incurred 11/11/2016	Last 4 digits of account number			
22 US BANK HOME MORTGAGE	Describe the property that secures the claim:	_{\$} 114,293.00	s 126,310.00	0.00
Creditor's Name 777 E WISCONSIN Number Street	Single Family House 8948 S Union Ave Chicago, IL 60620			
	As of the date you file, the claim is: Check all that apply.	•		
MILWAUKEE WI 53202 City State ZIP Code	Contingent Untiquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	Carloan) Stabiton for (outh as toy lien, machanis's firm)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt Date debt was incurred	Last 4 digits of account number			
e ten e servición de la contrata la contrata de la contrata del la contrata de la contrata del la contrata de la contrata del la contrata de la contrata del la contr	column A on this page. Write that number here:	\$ <u>132,108.00</u>	Nestine Minerio de estrole ataque aprodizate, vendo este presentate e	ellen ste die verten ook diese en landere is ee diese voorg

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Page 23 of 52 Document Fill in this information to identify your case: KATINA S MCNABB Debtor 1 First Name Dehint 2 (Spouse, if filing) First Name Middle Name * United States Bankruptcy Court for the: Northern District of Illinois Check if this is an Case number amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount \$ 7,600,00 \$ 7,600,00 \$ 0.00 Department of the Treasury / IRS Last 4 digits of account number Priority Creditor's Name 12/31/2007 PO Box 7346 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply PA 19101 Philadelphia ☐ Contingent ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify Ø No ☐ Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated

Other, Specify

No Yes

Is the claim subject to offset?

Debtor 1

 Case 17-11551
 Doc 1
 Filed 04/12/17
 Entered 04/12/17 10:03:50
 Desc Main

 KATINA S MCNABB
 Document
 Page 24 of 52
 Page 24 of 52

Last Name

Same	It 2: List All of Your NONPRK					
3.	Do any creditors have nonpriority u		-			
	No. You have nothing to report in t Yes	his part. Si	domit this form to	the court with your other schedules.		
	a a militar production of the company of		and a supplied to	$\sigma_{\rm so}$ is a surface of the solution of the content of $\sigma_{\rm sol}$. The solution of $\sigma_{\rm sol}$		s vantes agg
4.	List all of your nonpriority unsecure	d claims i	n the alphabetic	al order of the creditor who holds each claim. If a creditor has	more	than one
	nonpriority unsecured claim, list the cr	editor sepa	rately for each cl	aim. For each claim listed, identify what type of claim it is. Do not n, list the other creditors in Part 3.If you have more than three no	list da	nims aiready
	claims fill out the Continuation Page of		sa paruculai ciam	n, est ure ourer creusors at Part 3.11 you have more trait unee in	ифина	iy uisconcu
					538 508 538 508	siden weekinge de
				3 -	Tot	al claim
4.1	CAPITAL ONE BANK USA N	Α		Last 4 digits of account number 8052		2 007 00
	Nonpriority Creditor's Name				\$	2,987.00
	PO BOX 30281			When was the debt incurred? 01/02/2014		
	Namber Street					
	SALT LAKE	UT	84130			
· }	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Witho incurred the debt? Check one.			☑ Unsiquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	×		☐ Student loans		
	Check if this claim is for a comm	unity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	3	
	No No			Other. Specify CREDIT CARD		
	☐ Yes					
4.2	CAPITAL ONE N.A.	\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ant, e sportposter op rege verkrene fo Franklik Sakketskelente.	Last 4 digits of account number	\$	10,801.00
	Nonpriority Creditor's Name			When was the debt incurred? 02/02/2015		
	PO BOX 30281					
	Number Street		······································	учения		
:	SALT LAKE CITY	UT	84130	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	er .		Student loans		
	Check if this claim is for a comm	unity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
: :	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	•	

☐ At least one of the debtors at ☐ Check if this claim is for it is the claim subject to offset ☑ No ☐ Yes	a community debt		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>CREDIT CARD</u> 	
ALPHERA FINANCIAL Nonpriority Creditor's Name PO BOX 3608	SERVICE		Last 4 digits of account number 8052 When was the debt incurred? 04/06/2017	34,725.00
Number Street DUBLIN City	OH State	43016	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Chec			☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 and Debtor 2 only At least one of the debtors a	nd another		Type of NONPRIORITY unsecured claim:	
Check if this claim is for	a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Is the claim subject to offset No Yes	?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify AUTO LOAN	}

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 25 of 52 number (# formall)

Debtor 1

KATINA S MCNABB
First Name Middle Name

Part 2	
Part 2	
3 42 A 44	

	, in the second			
		m beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
DISCOVER FINANCIAL	SERVICE		Last 4 digits of account number	\$ 2,736.0
Nonpriority Creditor's Name PO BOX 15316			When was the debt incurred? 01/23/2015	
Number Street WILMINGTON	DE	19850	As of the date you file, the claim is: Check all that apply.	
City	State	ZP Code	☐ Contingent	
			Unliquidated	
Who incurred the debt? Check or	ne.		Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a co	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other, Specify CREDIT CARD	
No.				
☐ Yes				
NAVIENT	en e	an af ganda fin ee meely in Bertin (18-4000) (18 mee) (46 fin ee)	Last 4 digits of account number	\$ 14,961.0
Nonpriority Creditor's Name	·····	***************************************	Milhan was the debt incurred: 10/31/2007	
PO BOX 9500			When was the debt incurred? 10/3 1/2007	
Number Street			An of the data was the the electric in these at the set that each	
WILKES BARRE	PA	18773	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Marine San annual data of the state of the			Unisquidated	
Who incurred the debt? Check or	EED		☐ Disputed	
Debtor 1 only			Time of MONDBIODETY uncounted states	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and a	andhar		Student loans	
Check if this claim is for a co			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Chantesiaty Geot		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
Mo ☐ Yes				
esse un alvania horosado poli pipo opino indoces ha proposado de Trabanes de Antonosado de Roma la Stato en America	ed prices suited prices (10,000 per time); 15,000 per time	2000 m 24 5 7 7 9 6 20 9 2 4 2000 6 7 9 7 2 2 4 2000 6 7 9 2 2 4 2 5 6 7 9 20 6 7 9 2 2 4 2 5 7 9 20 6 7 9 2 2	Last 4 digits of account number	_{\$} 52,457.0
US DEPT OF EDUCATION)N/GL		——————————————————————————————————————	
Nonpriority Creditor's Name 2401 INTERNATIONAL L	ANE PO BO	X 7859	When was the debt incurred? 09/25/2008	
Number Street MADISON	WI	53704	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unaquidated	
Who incurred the debt? Check of	FIC.		Disputed	
Debtor 1 only			Town of MOMPHOPPTY	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and a	anothar		Student loans	
MALIEUS LONE OF THE GEOTORS AND A	AT ICAL ICI		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a co	ommunity debt		Obebts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
☑ No				
☐ Yes				

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main KATINA S MCNABB Document Page 26 of 52 number (# known)

Debtor 1

				2000	
ONEMAIN			Last 4 digits of account number	\$	9,948.0
Nonpriority Creditor's Name PO BOX 1010			When was the debt incurred? 07/07/2016		
Number Street EVANSVILLE	iN	47706	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Ch	ant ana		Unliquidated		
Debtor 1 only	eck tare.		M Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	1		Student loans		
At least one of the debtors	and another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is fo	r a community debt		you did not report as priority claims		
Is the claim subject to offs	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify LOAN		
No			wa Ouen Specify Contra		
☐ Yes					
CREDIT CONTROL I	TC	terrennes a vivier dem in medien konstallen bet det de fall fall fall fall fall fall fall fal	Last 4 digits of account number	\$	243.0
Nonpriority Creditor's Name		***************************************	When was the debt incurred? 02/19/2016		
5757 PHANTOM DR	330				
Number Street HAZELWOOD		63042	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
			☑ Untiquidated		
Who incurred the debt? Ch	eck one.		Disputed		
Debtor 1 only			To a of NONDDIODITY unconvent desires		
Debtor 2 only Debtor 1 and Debtor 2 only	•		Type of NONPRIORITY unsecured claim:		
At least one of the debtors			U Student loans		
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this claim is fo	•		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offs	et?		Other, Specify METROSOUTH		
☑ No ☑ Yes					
TATE & KIRLIN ASSO	TOTATES INC	Dellactor & Signature, indicas presentation and administrative and even	Last 4 digits of account number $3 9 0 4$	\$	319.0
Nonpriority Creditor's Name	5 0 5 1 1 2 1 1 1 5 1		When was the debt incurred? 02/11/2016		
2810 SOUTHAMPTO	N ROAD		When was the debt incurred? UZI 1 1/2 U 10		
Number Street PHILADELPHIA	PA	19154	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
			Unliquidated		
Who incurred the debt? Ch	eck one.		2 Disputed		
Debtor 1 only			Type of NONPRIORITY unsecured claim:		
Debtor 2 only Debtor 1 and Debtor 2 only	r				
At least one of the debtors			Student loans Obtainstines existe out of a constraint comment or thereouther		
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this claim is fo	r a community debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offs			Other, Specify ADT SECURITY		

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main KATINA S MCNABB Document Page 27 of 52 number (# known)

Debtor 1

Part 2:

s the debt incurred? 3/02/2015 date you file, the claim is: Check all that apply. Igent idated ICONPRIORITY unsecured claim: Int loans of not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY pits of account number s the debt incurred? 03/17/2015	\$ 338.0 \$ 208.0
date you file, the claim is: Check all that apply. Igent idated ted IONPRIORITY unsecured claim: Int loans It loans It loans arising out of a separation agreement or divorce that d not report as priority claims It pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
idated led IONPRIORITY unsecured claim: Int loans Intions arising out of a separation agreement or divorce that d not report as priority claims It to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
idated iONPRIORITY unsecured claim: Int loans attions arising out of a separation agreement or divorce that d not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
idated iONPRIORITY unsecured claim: Int loans attions arising out of a separation agreement or divorce that d not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
ion priority unsecured claim: Int loans Int loans Intions arising out of a separation agreement or divorce that Intions arising out of a separation agreement or divorce that Into pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY Intit of account number	
nt loans tions arising out of a separation agreement or divorce that d not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
nt loans tions arising out of a separation agreement or divorce that d not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
tions arising out of a separation agreement or divorce that d not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY	
d not report as priority claims to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY pits of account number	
to pension or profit-sharing plans, and other similar debts Specify CRANDON EMERGENCY pits of account number	ş <u>208.0</u>
pits of account number	\$ <u>208.0</u>
00/47/0045	\$ <u> </u>
00/47/0045	\$ 208.0
s the debt incurred? 03/17/2015	
s the debt nicurred?	
date you file, the claim is: Check all that apply.	
gent	
idated	
ed	
ONPRIORITY unsecured claim:	
nt toans	
tions arising out of a separation agreement or divorce that I not report as priority claims	
to pension or profit-sharing plans, and other similar debts	
Specify CIRCUIT COURT	
its of account number	\$_2,500.0
the debt incurred? 10/02/2015	
date you file, the claim is: Check all that apply.	
gent	
dated ed	
ou.	
ONPRIORITY unsecured claim:	
d loans	
it loans tions arising out of a separation agreement or divorce that I not report as priority claims	
it loans tions arising out of a separation agreement or divorce that I not report as priority claims	
	of NONPRIORITY unsecured claim: Ident loans ligations arising out of a separation agreement or divorce that Idd not report as priority claims obts to pension or profif-sharing plans, and other similar debts

Part 2

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main KATINA S MCNABB Document Page 28 of 252 number (if known)

Debtor 1

viter listing any entries on thi	s page, number then	n beginning wit	h 4.4, followed by 4.5, and so forth.	Total clain
1:			Last 4 digits of account number	_
Nonpriority Creditor's Name			When was the debt incurred?	\$
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Ch	eck one.		Unliquidated Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors			Student loans	
☐ Check if this claim is fo			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offse	et?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
No Yes				
1. Danés a siama l A a a a a l	One in a lea		Last 4 digits of account number 5 6 5 6	s 9.554.0
Professional Account Nonpriority Creditor's Name	Services inc		When was the debt incurred? 02/11/2015	\$ 0,004.0
PO BoX 188 Number Street			when was the dear incurred?	
Brentwood	TN	37024	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent Unliquidated	
Who incurred the debt? Che	eck one.		Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors a Check if this claim is for			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
is the claim subject to offse			Debts to pension or profit-sharing plans, and other similar debts other. Specify Metrosouth Medical	
M No			Other. Specify Well OSOUTH Wellicat	
Yes				
			Last 4 digits of account number 2 2 9 2	_{\$_} 1,155.0
University of Chicago Nonpriority Creditor's Name	Medicine	·	THE PARTY NAMED IN THE PARTY NAM	
15965 Collection Cent	er Drive		When was the debt incurred? 02/11/2015	
Number Street Chicago	IL.	60693	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ck one		Unliquidated	
_	ck one.		☑ Disputed	
Debtor 1 only Debtor 2 only			Tune of MONDPIOPITY uncogured doing	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors a	and another		Student loans	
Check if this claim is for			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offse	1?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
☑ No ☐ Yes			- Same Opening	

Debtor 1

Part 3:

KATINA S MCNABB

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main

Document Page 29 of 52

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Central Credit Services LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			40
20 Corporation Hills	Drive	***************************************	Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Saint Charles	МО	63301	Last 4 digits of account number 8 0 5 2
City	State	ZIP Code	
Client Services			On which entry in Part 1 or Part 2 did you list the original creditor?
3451 Harry S Truma	on Phys		Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	SEE DIVU		Part 2: Creditors with Nonpriority Unsecured
			Claims
Saint Charles	MO	63301	Last 4 digits of account number 2 1 8 4
City	State	ZIP Code	Canada Anna Canada Anna Anna Anna Anna Anna Anna Anna
Name	······································		On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
			Last 4 digits of account number
City	State	ZIP Code	On which arter is Bort to Bort O Hideon Hat the original are the O
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name		***************************************	Line of (Check anal) Dept 1: Creditors with Priority Haspayand Claims
Number Street	· · · · · · · · · · · · · · · · · · ·	 	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			Claims
			Last 4 digits of account number
City	State	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number

Debtor 1

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main KATINA S MCNABB Document Page 30 of 52 number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	7,600.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ §	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	7,600.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	67,418.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$	75,514.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	142,932.00

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 31 of 52

F	II in this i	nformation to	identify you	r case:			age e			
040400000		KATINA S								
	ebtor	First Name		Middle Name	Last	Name				
	ebtor 2 pouse II filing)) First Nærne	ı	Vicinille Name	£ast	Name		and the second s		
Ur	nited States	Bankruptcy Cour	nt for the: Norti	nem District of	Illinois	-	1			
	ase number	-		·	**************************************		_	Alternacional		
	known)									Check if this is an amended filing
<u>Of</u>	ficial I	Form 106	<u> </u>							
S	ched	ule G: E	Execut	ory Co	ntract	ts and	l Un	expired Le	ases	12/15
info add	rmation. I itional pa	lf more space ges, write you	is needed, c r name and	opy the addit case number	ional page, f (if known).	are filing to fill it out, nu	gether, imber t	, both are equally res he entries, and attac	ponsible for sup h it to this page. (plying correct On the top of any
1.	Mo. C	nave any exect Check this box a Fill in all of the	and file this fo	orm with the co	ourt with your	other sched	dules. Yo	ou have nothing else t on <i>Schedule A/B: Prop</i>	o report on this for perty (Official Form	m. 106A/B).
2.	List sepa	rately each pe , rent, vehicle	erson or con	pany with wi	hom you hav	ve the contr	act or I	ease. Then state wha	at each contract o	
		a ta a gila					v .			
	Person o	or company wi		u have the co	ntract or lea	ise		State what the con	tract or lease is fo	*
2.1.										
	Name		***				-			
	Number	Street					<u>.</u>			
	City	anan na antonomia and a second second	State	ZIP Code	ong a grand and a second	tarterania terrania de la co		e e e e e e e e e e e e e e e e e e e	t en et et et et en en en et en en et en en et en	
2.2	Name			***************************************	······································		•			
	Number	Street					-			
	City		State	ZiP Code		·····				
2.3	or and the state of the state o	om soons a sample soon ago on a samo	Sanc	Z# OGRE			enegerii be az e	er er er er en er	tarrantan tan meranangan di erangan dengan dan kababa	en et en
	Name	***************************************	· · · · · · · · · · · · · · · · · · ·			····				
	Number	Street					-			
	City		State	ZIP Code						
2.4										
	Name									
	Number	Street								
	City		State	ZIP Code						
2.5	terret districtive meaning of	e titre teg itenje retoriky e ereko oj.		A - A - A - A - A - A - A - A - A	e etera e tato it eat itata e ea e eag	general and a second con-		typerada na start na analysis (1941) ya tay ya k	ka ja kanta kuta kuju ja jarang jarang kangar	the residue of the south the second of the s
	Name	**************************************								
	Number	Street								
	City		State	ZIP Code						

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 32 of 52

Fill in this information to identify your case:	
Debtor 1 KATINA S MCNABB	
First Name Middle Name Last Name Debisor 2	
(Spouse, if filling) First Name Modifie Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If foroum)	
	Check if this is an
Official Form 10611	amended filing
Official Form 106H Schedule H: Your Codebtors	
	12/15
Codebtors are people or entities who are also liable for any debts you may have. Be a are filing together, both are equally responsible for supplying correct information. If n and number the entries in the boxes on the left. Attach the Additional Page to this pag case number (if known). Answer every question.	nore space is needed, copy the Additional Page till it out
1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as	a codebtor.)
No	
Q Yes	
Within the last 8 years, have you lived in a community property state or territory? Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washi	(Community property states and territories include ington, and Wisconsin.)
No. Go to line 3.	-
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	
☐ No ☐ Yes. In which community state or territory did you live?	
res. In which community state or territory did you live?	Fill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
The state of the s	
Number Street	
City State ZIP Code	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor is shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor	Make sure you have listed the creditor on
	Check all schedules that apply:
3.1	Contract was approximated the contract of the
Name	Schedule D, line
Nurreber Street	Schedule E/F, line
	Schedule G, line
Caty State ZEP Code	
3.2	D Schedule D, line
Name	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	
3.3	
Name	Schedule D, line
Number Street	Schedule E/F, line
······································	☐ Schedule G, line

ZEP Code

State

Fill in this information to identify	your case:					
Debtor 1 KATINA S MCNA	BB					
First Næne Debtor 2	Middle Name	Lasi Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number (If known)	**************************************			Check if th		
					ended filing lement showing postp	etition chanter 12
					as of the following da	•
Official Form 106l				MM / DE	D/ YYYY	
Schedule I: You	ır İncome					12/15
Be as complete and accurate as posupplying correct information. If you from separated and your spouseparate sheet to this form. On the	ou are married and not fili ise is not filing with you, o top of any additional pag	ng jointly, and yo do not include inf	ur spouse is lormation abo	living with your spou	ou, include information ise. If more space is ne	about your spouse. eded, attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-fili	aziinas na
If you have more than one job,			di-Reverse princes e de la companya	namenement (emercens vincens australians) in me		riteriores de servicios de la company de
attach a separate page with information about additional employers.	Employment status	Employed Mot employe	edi		☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.						
Occupation may include student or homemaker, if it applies.	Occupation	NURSE				
	Employer's name	***************************************	·/··			
	Employer's address					
		Number Street			Number Street	··········
		- mister dan ilimater da di meruta menerala menerala menerala menerala menerala menerala menerala menerala men				
		City	State ZIP C	nde	City	State ZIP Code
	How long employed ther	•	Olic Zi C		oly .	nue En Cone
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated.		. If you have nothin	ng to report for	any line, writ	te \$0 in the space. Includ	le your non-filing
If you or your non-filing spouse hat below. If you need more space, at			mation for all	employers for	r that person on the lines	
			For I	Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sale deductions). If not paid monthly,			2. \$	0.00	\$	
3. Estimate and list monthly over	time pay.		3. + \$	0.00	+ \$	
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$	0.00	\$	

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 34 of 52

Debtor 1	KATINA S	MCNABB		Case number (if known)
	First Name	Middle Name	Last Name	• • • • • • • • • • • • • • • • • • • •

		Fo	or Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$_	0.00	\$	
5. Lîst ali payroli deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	. \$	0.00	\$	
5b. Mandatory contributions for retirement plans	5b.		0.00	\$	
5c. Voluntary contributions for retirement plans	5c.		0.00		
•	5d.		0.00	\$	
5d. Required repayments of retirement fund loans		• -	0.00	\$	
5e. Insurance	5e.	·	0.00	\$	
5f. Domestic support obligations	5f.	⊅ _	0.00	\$	
5g. Union dues	5g.	3 _	· · · · · · · · · · · · · · · · · · ·	\$	
5h. Other deductions. Specify:	5h.	+\$_	0.00	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5t	ı. 6.	\$	0.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	
List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$	
8b. Interest and dividends	8b.	\$_	0.00	\$	
8c. Family support payments that you, a non-filling spouse, or a depend regularly receive	ent	- *****		-	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	
8d. Unemployment compensation	8d.	\$_	1,820.00	\$	
8e. Social Security	8e.	\$	0.00	\$	
8f. Other government assistance that you regularly receive					
Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce				
Specify:	8f.	\$_	0.00	\$	
8g. Pension or retirement income	8 g.	\$_	0.00	\$	
8h. Other monthly income. Specify:	8h.	+\$_	0.00	+\$	
2. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	1,820.00	\$	
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,820.00	\$ <u></u>	s 1,820.00
State all other regular contributions to the expenses that you list in Sche	dule .	J.			
Include contributions from an unmarried partner, members of your household, friends or relatives.	your d	iepend	lents, your room	imates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are Specify:			e to pay expens	es listed in <i>Schedule J.</i> 11. ⁴	+ \$ 0.00
2. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				-	\$ 1,820.00
13. Do you expect an increase or decrease within the year after you file this	form?	•			monthly income
Yes. Explain: Looking for a job.		·····	W-11-14-41-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4		······································
· · · · · · · · · · · · · · · · · · ·					

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 35 of 52

Valland Alexandra Commence and Com				
Fill in this information to identif	ly your case:			
Debtor 1 KATINA S MCNA	ABB Middle Name Last Name	Check if thi	s is:	
Debtor 2	CLEAR (1907)C	☐ An ame		
(Spouse, if filling) First Name	Middle Name Last Name	☐ ☐ A suppl		tpetition chapter 13
United States Bankruptcy Court for the	: Northern District of Illinois		es as of the following	
Case number (If known)		MM / DO	/ YYYY	
Official Form 106J		· · · · · · · · · · · · · · · · · · ·		
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as prinformation. If more space is need (if known). Answer every question Part 1: Describe Your Ho		ing together, both are equally re n. On the top of any additional p	sponsible for suppl ages, write your nan	ying correct ne and case number
1				
1. Is this a joint case? If No. Go to line 2.				
Yes. Does Debtor 2 live in a	separate household?			
□ No	•			
	ile Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No		***	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		SON	24	☐ No ☑ Yes
		The state of the s		□ No
				Yes
				☐ No ☐ Yes
				☐ No
				☐ Yes
			-	□ No
Do your expenses include expenses of people other than	☑ No			☐ Yes
yourself and your dependents?	☐ Yes			
Part 2: Estimate Your Ongo	ing Monthly Expenses			
Estimate your expenses as of you	r bankruptcy filing date unless you a	re using this form as a supplem	ent in a Chapter 13 o	case to report
expenses as of a date after the bai	nkruptcy is filed. If this is a suppleme			
applicable date.				
	n-cash government assistance if you d it on Sc <i>hedule I: Your Income</i> (Offic		Your expe	nses
	expenses for your residence. Include	•	**************************************	952.00
If not included in line 4:			•	
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or r	renter's insurance		4b. \$	0.00
4c. Home maintenance, repair,	and upkeep expenses		4c. \$	0.00
4d. Homeowner's association of	r condominium dues		4d. \$	0.00

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 36 of 52

Debtor 1

KATINA S MCNABB

First Name Middle Name Last Name

Case number (if known)_

			Your ex	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	125.00
	6b. Water, sewer, garbage collection	6b.	\$	30.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	320.00
8.	Childcare and children's education costs	8.	\$	100.00
9.	Clothing, laundry, and dry cleaning	9.	\$	80.00
10.	Personal care products and services	10.	\$	80.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	140.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Charitable contributions and religious donations	14.	\$	50.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			-
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	208.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	530.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: JC PENNY CREDIT CARD	17c.	\$	38.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom.	ie.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 37 of 52

Debtor	1 KATINA S MCNABB First Name Middle Name Last Name	se number (if known)		
21. O	ther. Specify:	21.	+ \$	0.00
22. C a	alculate your monthly expenses.			
22	la. Add lines 4 through 21.	22 a.	\$	2,703.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22	c. Add line 22a and 22b. The result is your monthly expenses.	22 c.	\$	2,703.00
			(entre en
23. Cal	culate your monthly net income.			
23a	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,820.00
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	2,703.00
23c	. Subtract your monthly expenses from your monthly income.			-883.00
	The result is your monthly net income.	23 c.	\$	-003.00
24. Do	you expect an increase or decrease in your expenses within the year after you file the	his form?		
	example, do you expect to finish paying for your car loan within the year or do you expect	•		
	rtgage payment to increase or decrease because of a modification to the terms of your mo	rtgage?		
Ø	***************************************			······································
u	Yes. Explain here:			
				:
				İ
				:

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 38 of 52

	Document 1 a	gc 30 01 32	
II in this information to identify your case:			
abtor 1 KATINA S MCNABB			
bitor 1 First Name Middle Name	Last Name		
obtour 2 Nourse, Villing) First Name Marke Name	Last Namo	-	
ited States Bankruptcy Court for the: Northern District of	Illinois		
ise number			
kincousts)	and the second of the second o	(Check if this is
			amended filing
Official Form 106Dec			
Declaration About an	Individual E	ebtor's Schedules	12/15
			<u> </u>
f two married people are filing together, both are	equally responsible for su	pplying correct information.	
Did you pay or agree to pay someone who is N If No Yes. Name of person	IOT an attorney to help you	u fill out bankruptcy forms? . Attach Bankruptcy Petition Preparer's Notice, Declarat	tion. and
La res. Name of person	<u></u>	Signature (Official Form 119).	кя, апа
Under penalty of perjury, I declare that I have re that they are true and correct.	ead the summary and sch	edules filed with this declaration and	
Signature of Debtor 1	Signature of Debtor	(2	
Date O4 // 2017	Date	ww	

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 39 of 52

Fill in t	his information to identify yo	our case:					
Debtor 1	KATINA S MCNABI	В					
Debtor 2	First Name	Madie Name	Last Name				
	iffoling) FastName	Middle Name	Last Name				
United S	States Bankruptcy Court for the: No	orthern District of III	inois				
Case nu			***************************************	The state of the s			Check if this is an
	·					_	amended filing
Offici	al Form 107						
State	ement of Financ	cial Affair	s for Indiv	iduals Filin	g for Ba	nkruptcy	04/16
informat number	omplete and accurate as position. If more space is needed (if known). Answer every que	d, attach a separat estion.	e sheet to this for	m. On the top of any			
Part 1	Give Details About Yo	our mantai Stati	us and where Y	on rivea Reloie			
1. Wha	nt is your current marital stat	ius?					
	Married						
M	Not married						
	No Yes. List all of the places you I Debtor 1:	ived in the last 3 ye	Dates Debtor 1	where you live now.			Dates Debtor 2 lived there
				Same as Debtor 1			Same as Debtor 1
	***************************************		From				From
	Number Street		То	Number Street			То
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				······································	
	City S	State ZIP Code		City	State .	ZIP Code	
				Same as Debtor 1			Same as Debtor 1
							
	Number Street		From	Number Street	······································		From
	C≩y S	Rate ZIP Code		City	State	ZIP Code	
state	nin the last 8 years, did you one sand territories include Arizo						
		hadula H. Vour Cad	ahtore (Official Ea-	n 106H)			
	Yes. Make sure you fill out Sch	ieduje ri. Your Cod	eviors (Unicial Fon	п т∪огту.			

Part 2	Explain the Sources of	Your Income					

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 40 of 52

Debtor		i Name	Case nu	ımber (if known)	
F	Did you have any income from employme ill in the total amount of income you receive f you are filing a joint case and you have inc	ed from all jobs and all bus	inesses, including part-ti	me activities.	ndar years?
	☑ No ☑ Yes. Fill in the details.				
		Debtor 1		Destor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$19,878.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
	For last calendar year: (January 1 to December 31,2016	Wages, commissions, bonuses, tips Operating a business	\$ 72,933.00	Wages, commissions, bonuses, tips Operating a business	\$
	For the calendar year before that:	Wages, commissions, bonuses, tips		☐ Wages, commissions,	
	(January 1 to December 31,2015	Operating a business	\$73,000.00	bonuses, tips Operating a business	\$
g: Li	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Filt in the details.	g a joint case and you have	income that you receive	ed together, list it only once	
•	a ics. i m ni ure decars.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Unemployment	\$ 910.00 \$		\$
			\$		\$
	For last calendar year:		\$		\$
	(January 1 to December 31,2016		\$	The state of the s	\$
	e de la companya de la companya de la companya de la companya de la companya de la companya de la companya de		\$		\$ <u></u>
	For the calendar year before that:		\$		\$
	(January 1 to December 31,2015)	Wester	\$		\$

Entered 04/12/17 10:03:50 Case 17-11551 Doc 1 Filed 04/12/17 Desc Main

Document Page 41 of 52 KATINA S MCNABB Debtor 1 Case number (if loows) First Name Middle Maron Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ■ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarity consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment **US BANK ACCEPTANCE** 03/03/2017 952.00 114,293.00 Mortgage Creditor's Name Car PO BOX 5070 Credit card Number Street Loan repayment Suppliers or vendors 48086 SOUTHFIELD MI 7IP Code State ■ Mortgage Creditor's Name Car Car Credit card Nameter Street Loan repayment ☐ Suppliers or vendors Other ZIP Code

71P Code

State

☐ Mortgage

Other_

☐ Loan repayment Suppliers or vendors

Car Car Credit card

Creditor's Name

Namber Street

City

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 42 of 52

otor 1	KATINA S M	CNABB				Case number (if known)		
,	First Name N	diddle Name	Last Name		-	•		
nsid corpo agen auch	ers include your re orations of which yo it, including one for as child support a	latives; any ge ou are an offic a business ye	eneral partners; re er, director, perso	latives of any	general partners; p r owner of 20% or i	partnerships of whic more of their voting	who was an insider? h you are a general partr securities; and any mana r domestic support obliga	aging
U Y	es. List all paymer	nts to an inside	er.	Dates of	Total amount	Amount vou stří	Reason for this payment	
				payment	paid	owe		
					S	S		
	Insider's Name				**************************************			
	Number Street							
	City	Sa	e ZiP Code					
					\$	\$		
	Insider's Name							
	Number Street							
	City	Sta	ie ZIP Code					
an ir Inclu	nsider? de payments on de	ebts guaranted	ed or cosigned by	an insider.	3 -	X.	n account of a debt tha	v 1+ 1/1
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
					•	\$		
	Insider's Name				Ψ	-		
	Number Street							
	City	Sta	te ZIP Code					
	144							
	7-155 N. 155				\$. .		
	Insider's Name							
	Number Street							

Case 17-11551 Entered 04/12/17 10:03:50 Doc 1 Filed 04/12/17 Desc Main

Document Page 43 of 52 KATINA S MCNABB Debtor 1 Case number (if known) Middle Name Identify Legal Actions, Repossessions, and Foreclosures Part 4: 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. M No Q Yes. Fill in the details. Pending Case title Court Manne On appeal Concluded Number Street Case number Cay 7P Core Pending Case title Court Name On appeal ☐ Concluded Number Street Case number City State 7IP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. 4 Yes. Fill in the information below. Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State ZIP Code Property was attached, seized, or levied.

ZIP Code

Describe the property

Property was repossessed. Property was foreclosed.

Property was garnished.

Property was attached, seized, or levied.

Value of the property

Creebber's Name

Street

Number

Oily

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 44 of 52

KATINA S MCNABB	Case number (if known)
First Name Middle Name Last	Name
thin 90 days before you filed for bankru counts or refuse to make a payment bec	ptcy, did any creditor, including a bank or financial institution, set off any amounts from your
No	ause you owed a debt:
Yes. Fill in the details.	
	Describe the action the creditor took Date action Amount
	was taken
Creditor's Name	
Number Street	<u> </u>
	-
City State ZIP Code	Last 4 digits of account number: XXXX
hin 1 year hefore you filed for hankrunt	cy, was any of your property in the possession of an assignee for the benefit of
ditors, a court-appointed receiver, a cu	
No	
Yes	
	Alterna
List Certain Gifts and Contribu	poss
	etcy, did you give any gifts with a total value of more than \$600 per person?
No	vicy, did you give any gifts with a total value of more than \$600 per person?
	etcy, did you give any gifts with a total value of more than \$600 per person?
No Yes. Fill in the details for each gift.	en en en en en en en en en en en en en e
No	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street	Describe the gifts Dates you gave Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Value Value Value Value Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gat Number Street City State ZIP Code Person's relationship to you	Describe the gifts Dates you gave the gifts \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Describe the gifts
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Describe the gifts
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Describe the gifts
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Describe the gifts
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Value Value Value Value Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Value Value Value Value Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZEP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value Value Value Value Value Value Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts Dates you gave the gifts \$ Describe the gifts Dates you gave Value

Person's relationship to you _

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 45 of 52

KATINA S MCNABB

1 KATINA S MCNABB First Name Middle Name Last N	Case number (if known)		
riisa naume mixigilio naime Last N	igni i ro		
ithin 2 years before you filed for bankrupt	tcy, did you give any gifts or contributions with a total value	of more than	\$600 to any charity?
No			
Yes. Fill in the details for each gift or contr	ibution.		
	Describe what you contributed	Date you	Value
Gifts or contributions to charities that total more than \$600	Describe what you contributed	contributed	value
			•
Charity's Name			***************************************
			\$
Number Street			
E-Allerine Settingery - Candi Manuari			
	,		
City State ZIP Code			
6: List Certain Losses			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
	claims on line 33 of Schedule A/B: Property.		
			\$
74 List Certain Payments or Trans	fers	•	
Abia danas bafan yan Stad fan bankarinta	ry, did you or anyone else acting on your behalf pay or trans	for any propo	shi ta anyona
ou consulted about seeking bankruptcy of		ici airy prope	ity to airyone
dude any attorneys, bankruptcy petition prep	parers, or credit counseling agencies for services required in you	r bankruptcy.	
No			
Yes. Fill in the details.			
		Date payment o	or Amount of payme
Person Who Was Paid		transfer was made	A second of the second
POSCINI VIND VVOS POSU		•	
Number Street			\$
			\$
City State ZIP Code			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 46 of 52

	First Name Last		Case numi	ber (if known)	<u></u>	
lva		Description and value of any property trans	žerred		Date payment or	Amount of
			hilli		transfer was made	payment
	Person Who Was Paid					s
	Number Street				***************************************	4
	Pagninos Guidos					\$
	City State ZIP Code					
	Email or website address	_				
	Person Who Made the Payment, if Not You					
ri	not include any payment or transfer that yo No Yes. Fill in the details.	ou issted on line 16.				
		Description and value of any property trans	ferred		Date payment or	Amount of pa
					transfer was made	
	Person Who Was Paid					
	Number Street				******	\$
						\$
	City State ZIP Code	Assertation of the second seco				
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your ade both outright transfers and transfers r not include gifts and transfers that you had	nade as security (such as the granting of a s				
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting of a security (such as the gran	security i	interest or m		perty).
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your ade both outright transfers and transfers r not include gifts and transfers that you had	business or financial affairs? nade as security (such as the granting of a sive already listed on this statement. Description and value of property	security i	interest or m	ortgage on your pro	perty).
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your ade both outright transfers and transfers r not include gifts and transfers that you had	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your ade both outright transfers and transfers n not include gifts and transfers that you had No Yes. Fill in the details.	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ade both outright transfers and transfers mot include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ade both outright transfers and transfers mot include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your aide both outright transfers and transfers rate include gifts and transfers that you have the second se	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup sterred in the ordinary course of your ude both outright transfers and transfers in not include gifts and transfers that you have the state of the	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your aide both outright transfers and transfers rate include gifts and transfers that you have the include gifts and transfers. Person Who Received Transfer City State ZiP Code Person's relationship to you	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran
eniciu o n	nin 2 years before you filed for bankrup isferred in the ordinary course of your aide both outright transfers and transfers rate include gifts and transfers that you have the include gifts and transfers. Person Who Received Transfer City State ZiP Code Person's relationship to you	business or financial affairs? nade as security (such as the granting of a size already listed on this statement. Description and value of property of transferred o	security i	interest or m	ortgage on your pro	perty). I Date tran

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 47 of 52

Case number (if known)_

KATINA S MCNABB

Debtor 1

are a beneficiary? (These are often	r bankruptcy, did you transfer any proper	ly to a self-settled trust or similar device o	f which you
	called asset-protection devices.)		
Mo No			
Yes. Fill in the details.			
	Description and value of the prope	rty transferred	Date transfer
			was made
			•
Name of trust	and and a state of the state of		·
			•
***************************************	Secretary and a secretary and		
		中国大学中国大学的工作,他们也是有15年间,14年的15月25日,15年至14年的14日,15年21日,15年21日,15年21日,15年21日,15年21日,15年21日,15年21日,15年21日,15年21日,15年	ann agus ga a thuan durann o da amerikannon deel bahuunnen an ee
t 8: List Certain Financial A	ccounts, instruments, Safe Deposit	Boxes, and Storage Units	
Within 1 year before you filed for t	pankruptcy, were any financial accounts o	or instruments held in your name, or for yo	ur benefit,
closed, sold, moved, or transferre			•
<u> </u>		ficates of deposit; shares in banks, credit	unions,
	, cooperatives, associations, and other fin	nancial institutions.	
Mo			
Yes. Fill in the details.	v.	e ya e e e e e e e e e e e e e e e e e e	. · ·
	Last 4 digits of account number	Type of account or Date account was instrument closed, sold, moves	Last balance before I, closing or transfer
		or transferred	, Goong or nation
Name of Financial Institution	AMERICA: INCOME AND ADDRESS OF THE A		
Name of Charcas distillion	XXXX	Checking	\$
Number Street	NORTH CONTROL OF THE	☐ Savings	
		Money market	
		☐ Brokerage	
City State 29	P Code	Other	
	xxxx	☐ Checking	\$
		☐ Savings	
Name of Financial Institution			
Name of Financial Institution Number Street		☐ Money market	
		☐ Money market ☐ Brokerage ☐ Other	

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 48 of 52

KATINA S MCNABB

btor 1 KATINA'S MCNABB First Name Middle Name L	ast Name Ca	ase number (if known)
First Name Mixide Name L	ast Name	
Have you stored property in a storage un	it or place other than your home within 1 ye	ar before you filed for bankruptcy?
☑ No		
Yes. Fill in the details.		The state of the s
	Who else has or had access to it?	Describe the contents Do you sti
Name of Storage Facility	Name	U No
name of our age racing	real are	Yes
Number Street	Number Street	nu.
	Cay State ZBP Code	
City State ZIP Code	-	
irt 9: Identify Property You Hok	or Control for Someone Else	
Do you hold or control any property that	someone else owns? Include any property	vou borrowed from, are storing for
or hold in trust for someone.	. Common of the common state of the common sta	you sortewed from, are storing for,
₩ No		
Yes. Fill in the details.		
	Where is the property?	Describe the property Value
Owner's Name	-	•
		· V
Number Street	Humber Street	
	***************************************	_
	_ City State ZIP Code	
City State ZIP Code	•	
iri 10: Give Details About Environ	imental information	
ASSANCE AND AND AND AND AND AND AND AND AND AND		
r the purpose of Part 10, the following de	finitions apply:	
<u>-</u>	ate, or local statute or regulation concerning	
	or material into the air, land, soil, surface w	· · ·
including statutes or regulations control	ling the cleanup of these substances, waste	s, or material.
Site means any location, facility, or prop	erty as defined under any environmental law	v, whether you now own, operate, or
utilize it or used to own, operate, or utiliz	te it, including disposal sites.	
Hazardous material means anything an e	environmental law defines as a hazardous w	aste, hazardous substance, toxic
substance, hazardous material, pollutan	t, contaminant, or similar term.	
nort all notices, releases, and proceeding	s that you know about, regardless of when	they occurred
port an inducta, reseases, asia procedure	to ame you allow about regulation of which	arcy vocanica.
Has any governmental unit notified you t	hat you may be liable or potentially liable un	der or in violation of an environmental law?
€ No		
Q Yes. Fill in the details.		
	Governmental unit Environ	mental law, if you know it Date of notice
WARRANIA		
Name of site	Governmental unit	AMERICAN AND AND AND AND AND AND AND AND AND A
Number Street		
Manager Outer	Number Street	
	Number Street	
	Number Street City State ZIP Code	
City State ZIP Code		

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 49 of 52

Case number (if known)

KATINA S MCNABB

Debtor 1

No			
No Yes. Fill in the details.			
i co. I in ili uic ucialo.	Governmental unit	Environmental law, if you know i	t Date of notice
			e Mariana Amariana and Amariana Mariana Mariana Mariana
Name of size	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		·
City State ZEP	Code		
e wan been a narty in any indici	al or administrative proceeding under an	v omvirnemental law? Include s	ottlements and orders
No		A small a un seu real a service between 11 au 2 consideration en	cultivite and views.
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
Case title			☐ Pending
	Court Name		On appe
			un appe
	Number Street		Conclud
	Number Street		Conclud
nin 4 years before you filed for l A sole proprietor or self-em	City State ZIP Cooper Business or Connections to Any pankruptcy, did you own a business or his ployed in a trade, profession, or other ac	Business ave any of the following connectivity, either full-time or part-times	tions to any business?
Give Details About You in 4 years before you filed for I A sole proprietor or self-email A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the Above applies.	City State ZIP Coordinates or Commections to Any conkruptcy, did you own a business or his bloyed in a trade, profession, or other actly company (LLC) or limited liability partinging executive of a corporation ne voting or equity securities of a corporation Go to Part 12.	Business ave any of the following connectivity, either full-time or part-timership (LLP) ation	ctions to any business? ne
Give Details About You in 4 years before you filed for I A sole proprietor or self-email A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the Above applies.	City State ZIP Cooper Business or Connections to Any conkruptcy, did you own a business or he ployed in a trade, profession, or other actly company (LLC) or limited liability partinging executive of a corporation ne voting or equity securities of a corporation Go to Part 12.	Business ave any of the following connectivity, either full-time or part-timership (LLP) ation iness. Employer Ide	tions to any business?
Give Details About You in 4 years before you filed for I A sole proprietor or self-em A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above Business Name	City State ZIP Coordinates or Commections to Any conkruptcy, did you own a business or his bloyed in a trade, profession, or other actly company (LLC) or limited liability partinging executive of a corporation ne voting or equity securities of a corporation Go to Part 12.	Business ave any of the following connectivity, either full-time or part-timership (LLP) ation iness. Employer Ide	ntification number
Give Details About You in 4 years before you filed for I A sole proprietor or self-em A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above	City State ZIP Coordinates or Commections to Any conkruptcy, did you own a business or his bloyed in a trade, profession, or other actly company (LLC) or limited liability partinging executive of a corporation ne voting or equity securities of a corporation Go to Part 12.	Rusiness ave any of the following connectivity, either full-time or part-timership (LLP) ation iness. s. Employer Ide Do not includ	ntification number le Social Security number or ITIN.
Give Details About You in 4 years before you filed for I A sole proprietor or self-em A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above Business Name	City State ZIP Coo car Business or Connections to Any cankruptcy, did you own a business or his ployed in a trade, profession, or other act ty company (LLC) or limited liability part ging executive of a corporation ne voting or equity securities of a corporation Go to Part 12. and fill in the details below for each business Describe the nature of the business Name of accountant or bookkeeper	Rusiness ave any of the following connectivity, either full-time or part-timership (LLP) ation iness. s. Employer Ide Do not includ	ntification number le Social Security number or ITIN.
Give Details About You in 4 years before you filed for I A sole proprietor or self-em A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above Business Name	City State ZIP Cooker Business or Connections to Any pankruptcy, did you own a business or holoyed in a trade, profession, or other actly company (LLC) or limited liability partinging executive of a corporation ne voting or equity securities of a corporation Go to Part 12. and fill in the details below for each business Describe the nature of the busines	ave any of the following connectivity, either full-time or part-timership (LLP) ation iness. Employer Ide Do not includ EIN: Dates busine From Employer Ide	ctions to any business? ne ntification number le Social Security number or ITIN. ss existed To ntification number
Give Details About You in 4 years before you filed for I A sole proprietor or self-em A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above Business Name	City State ZIP Coo CERT Business or Connections to Any cankruptcy, did you own a business or he ployed in a trade, profession, or other ac ty company (LLC) or limited liability part ging executive of a corporation ne voting or equity securities of a corporation Go to Part 12. and fill in the details below for each business Describe the nature of the business Name of accountant or bookkeeper Code	ave any of the following connectivity, either full-time or part-times ation iness. Employer Ide Do not includ EIN: Dates busine From Employer Ide Do not includ	ntification number le Social Security number or ITIN. To
Give Details About You in 4 years before you filed for It A sole proprietor or self-emply A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above Business Name	City State ZIP Coo CERT Business or Connections to Any cankruptcy, did you own a business or he ployed in a trade, profession, or other ac ty company (LLC) or limited liability part ging executive of a corporation ne voting or equity securities of a corporation Go to Part 12. and fill in the details below for each business Describe the nature of the business Name of accountant or bookkeeper Code	ave any of the following connectivity, either full-time or part-timership (LLP) ation iness. Employer Ide Do not includ EIN: Dates busine From Employer Ide	ctions to any business? ne ntification number le Social Security number or ITIN. ss existed To ntification number

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 50 of 52

or 1	KATINA S MCNABB	Case number	(if known)
	First Name Middle Name Last N	lame	
	a	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Business Name		EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
			From To
	City State ZIP Code	·	
Vitt	nin 2 years before you filed for bankrupt	tcy, did you give a financial statement to anyone at	out your business? Include all financial
ısti 1	itutions, creditors, or other parties.		
	Yes. Fill in the details below.		
		Date issued	

	Name	MM / DD / YYYYY	
	Number Street		

	City State ZiP Code		
1	21 Sign Below		
an: in (18	swers are true and correct. I understand	t of Financial Affairs and any attachments, and I ded that making a false statement, concealing proper result in fines up to \$250,000, or imprisonment for	ly, or obtaining money or property by fraud
	Signature of Debtor 1	Signature of Debtor 2	
	Date 04-11-2017	Date	
Dic	l you attach additional pages to Your St	tatement of Financial Affairs for Individuals Filing f	or Bankruptcy (Official Form 107)?
	No Yes		
	l you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy fo	orms?
	Yes. Name of person	Attac	h the Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119).

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 51 of 52

Fill in this in	formation to ide	entify your case:		
Debtor 1	KATINA S M	ICNABB Middle Name	Lasi Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court f	or the: Northern District of Illinois		₹
Case number (If known)	***************************************		••	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's credit ACCEPTANCE CORP	☐ Surrender the property.	□ No
naue.	Retain the property and redeem it.	ජ Yes
Description of 2013 NISSAN property securing debt:	☐ Retain the property and enter into a Reaffirmation Agreement.	
G	Retain the property and [explain]: CONTINUE TO PAY	
Creditor's US BANK HOME MORTGAGE	☐ Surrender the property.	☐ No
nane.	Retain the property and redeem it.	Y es
Description of Single Family House 8948 S Union property Chicago IL 60620 securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☑ Retain the property and [explain]: CONTINUE TO PAY MORTGAGE	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
Cooling was:	☐ Retain the property and [explain]:	
Creditor's	Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
soming was:	Retain the property and [explain]:	

Case 17-11551 Doc 1 Filed 04/12/17 Entered 04/12/17 10:03:50 Desc Main Document Page 52 of 52

Debtor 1

KΔ	TIN	Δ S	MON	NABB
\sim	1 11 41	40	WICH	VMDD

irst Name Middle Name Last Name

Case number (#known)_____

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		Yes
art 3: Sign Below		
Under penalty of perjury, I declare that I have indicated personal property that is subject to an unexpired lease	d my intention about any property of my estate that e.	secures a debt and any
Signature of Debtor 1	c	
Signature of Debtor 1	Signature of Debtor 2	
Date 4 12 2017	Date MM / DD / YYYY	